

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AM	7712	4/23/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71622	8/18/00
RESPONSE FORMALITY REVIEW	LC	1024	4-25-02

### INDEX OF CLAIMS

- |   |                            |   |              |
|---|----------------------------|---|--------------|
| ✓ | Rejected                   | N | Non-elected  |
| = | Allowed                    | I | Interference |
| - | (Through numeral) Canceled | A | Appeal       |
| ÷ | Restricted                 | O | Objected     |

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
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02-25-02

If more than 150 claims or 10 actions  
staple additional sheet here

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